



**MISSOURI ETHICS COMMISSION**  
**CONTRIBUTIONS AND LOANS RECEIVED**  
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE UNITED FOR MISSOURI'S PRIORITIES		2. REPORT DATE 4/1/2010	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME: ADDRESS: CITY / STATE: View Supplemental Form(s) EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$ 0.00	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$ 168,100.00	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 168,100.00	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>MONETARY</b> CONTRIBUTIONS		\$ 168,100.00	
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>IN-KIND</b> CONTRIBUTIONS		\$ 0.00	
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)		AMOUNT RECEIVED	
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$ 0.00	
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$ 0.00	
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ 0.00	
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$ 0.00	
C. LOANS RECEIVED			
15. NAME AND ADDRESS OF LENDER		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
NAME: ADDRESS: CITY / STATE:			\$
NAME: ADDRESS: CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$ 0.00	
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$ 0.00	
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$ 0.00	
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$ 0.00	
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$ 168,100.00	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ 168,100.00	



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

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NAME OF COMMITTEE UNITED FOR MISSOURI'S PRIORITIES	DATE 4/1/2010
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**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: The Civic Council of Greater Kansas City CITY/STATE: 1200 Main Street Suite 230 EMPLOYER: Kansas City, MO 64105 <input checked="" type="checkbox"/> COMMITTEE:	3/18/2010 ----- \$ 0.00	\$ 25,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: BAC Administrative District CITY/STATE: Council of Eastern MO 2000 Market Street EMPLOYER: St. Louis, MO 63103 <input checked="" type="checkbox"/> COMMITTEE:	3/19/2010 ----- \$ 0.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Hunt Midwest CITY/STATE: 8300 N E Underground Drive EMPLOYER: Kansas City, MO 64161 <input type="checkbox"/> COMMITTEE:	3/29/2010 ----- \$ 0.00	\$ 5,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: SEIU CITY/STATE: 1800 Massachusetts Ave NW EMPLOYER: Washington, DC 20036 <input checked="" type="checkbox"/> COMMITTEE:	3/29/2010 ----- \$ 0.00	\$ 50,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Int. Assoc. of Fire Fighters Local 42 CITY/STATE: 6320 Manchester Suite 42A EMPLOYER: Kansas City, MO 64133-4878 <input checked="" type="checkbox"/> COMMITTEE:	3/29/2010 ----- \$ 0.00	\$ 5,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: IAFF Local 42 PAC CITY/STATE: 6320 Manchester Ave Suite 42A EMPLOYER: Kansas City, MO 64133 <input checked="" type="checkbox"/> COMMITTEE:	3/29/2010 ----- \$ 0.00	\$ 5,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Taxpayers Unlimited Inc CITY/STATE: 6320 Manchester Ave Suite 42B EMPLOYER: Kansas City, MO 64133 <input checked="" type="checkbox"/> COMMITTEE:	3/29/2010 ----- \$ 0.00	\$ 10,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ballot Initiative Group of Missouri Inc CITY/STATE: 2725 Clifton Avenue EMPLOYER: St. Louis, MO 63139-2712 <input checked="" type="checkbox"/> COMMITTEE:	2/24/2010 ----- \$ 0.00	\$ 15,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



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CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: KC Building & Construction Trade Council CITY/STATE: 400 South Main Street EMPLOYER: Independence, MO 64050 <input checked="" type="checkbox"/> COMMITTEE:	3/4/2010 ----- \$ 0.00	\$ 6,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Int. Assoc. of Fire Fighters Local 42 CITY/STATE: 6320 Manchester Suite 42A EMPLOYER: Kansas City, MO 64133-4878 <input checked="" type="checkbox"/> COMMITTEE:	3/4/2010 ----- \$ 0.00	\$ 5,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Taxpayers Unlimited Inc CITY/STATE: 6320 Manchester Ave Suite 42B EMPLOYER: Kansas City, MO 64133 <input checked="" type="checkbox"/> COMMITTEE:	3/4/2010 ----- \$ 0.00	\$ 5,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greater KC AFL-CIO CITY/STATE: COPE Registration Fund 1021 Pennsylvania Ave EMPLOYER: Kansas City, MO 64105 <input checked="" type="checkbox"/> COMMITTEE:	3/4/2010 ----- \$ 0.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greater KC AFL-CIO CITY/STATE: COPE Registration Fund 1021 Pennsylvania Ave EMPLOYER: Kansas City, MO 64105 <input checked="" type="checkbox"/> COMMITTEE:	3/16/2010 ----- \$ 0.00	\$ 25,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: KC MO Fed of Teachers Local 691 CITY/STATE: 3901 Main St. Suite 201 EMPLOYER: Kansas City, MO 64111-1927 <input checked="" type="checkbox"/> COMMITTEE:	3/16/2010 ----- \$ 0.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Industry Advancement Fund CITY/STATE: Heavy Constructors 3101 Broadway Suite 780 EMPLOYER: Kansas City, MO 64111 <input checked="" type="checkbox"/> COMMITTEE:	3/18/2010 ----- \$ 0.00	\$ 10,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY/STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)